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Safety



**COMMANDER'S SAFETY ASSESSMENT AND
INSPECTION GUIDE**

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OPR: 319 ARW/SEG (Mr Gary Johnson)

Certified by: Major Harry M. Harrison

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This guide provides Commanders the criteria by which their units will be assessed during their annual Ground, Flight, and Weapons Safety Assessments/Inspections. The objective of our inspection program is to provide Commanders with direct feedback on the effectiveness of their safety program, their compliance with USAF, HQ AMC, AFOSH and OSHA safety standards and an assessment of their squadron's safety culture. Our goal is to promote an effective safety culture, which provides for low risk operations within the workplace and identifies hazards, prevents injury, minimizes wasted resources and complies with statutory Code of Federal Regulations (CFR) guidance on occupational safety and health standards.

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Chapter 1

COMMANDER'S MISHAP PREVENTION PROGRAM

1.1. Rating Scale: The assessment will cover all facets of the USAF Mishap Prevention Program.

1.1.1. OUTSTANDING: Performance or operation far exceeds mission and regulatory requirements. Unit safety culture is proactive with a majority of personnel fully aware of all safety requirements and actively promoting hazard reduction through risk management principles-*mishap potential is very low*. Procedures and activities are carried out in a far superior manner. Resources and programs are very efficiently managed and are of exceptional merit. No deficiencies exist.

1.1.2. EXCELLENT: Performance or operation exceeds mission and regulatory requirements. Unit safety culture is active with most personnel fully aware of safety requirements and some promoting hazard reduction through risk management principles-*mishap potential is low*. Procedures and activities are carried out in a superior manner. Resources and programs are very efficiently managed with three or less program deficiencies.

1.1.3. SATISFACTORY: Performance or operation meets mission and regulatory requirements. Unit culture is safe with an acceptable level of safety understanding and some efforts used in promoting hazard reduction through risk management principles-*mishap potential is low*. Procedures and activities are carried out in an effective and competent manner. Resources and programs are efficiently managed. Minor deficiencies may exist but do not impede mission accomplishment.

1.1.4. MARGINAL: Performance or operation does not meet all mission or regulatory requirements. Unit culture is bordering on unsafe with many personnel unaware or not following safety requirements with little effort expended toward hazard reduction through risk management principles-*mishap potential is moderate*. Procedures and activities are not carried out in an efficient manner. Resources and programs are not efficiently managed. Deficiencies exist that impede mission accomplishment. Deficient areas will be reevaluated within 90 days.

1.1.5. UNSATISFACTORY: Performance or operation does not meet mission or regulatory requirements. Unit culture is unsafe with most personnel unaware of or choosing to ignore safety requirements. No effort is expended toward hazard reduction through risk management procedures-*mishap potential is high*. Procedures and activities are not carried out in an adequate manner. Resources and programs are not adequately managed. Significant deficiencies exist that seriously limit mission accomplishment. Deficient areas will be reevaluated within 90 days.

1.2. Program Categories:

1.2.1. Commander's Support and Management of Unit Safety Program: This category encompasses the commander's support for all aspects of safety to include: Assignment and training of USRs, Flight Safety Officers (FSOs), Weapons Safety Representatives and any other safety-related training essential for reducing risks. Additionally, attendance at USR and safety-related meetings will indicate commander's support for safety programs. Mishap frequency and hazard abatement will also be graded here.

1.2.2. Safety Program Compliance: This category encompasses unit's compliance with AFI, OSHA and AFOSH standards. Use of and training in confined space, lockout/tagout, hazard abatement, facility maintenance, seatbelt usage and motorcycle safety training will be evaluated under this area.

1.2.3. Unit Operational Risk Management (ORM) Program:

1.2.3.1. OUTSTANDING: Basic requirements of SATISFACTORY and EXCELLENT plus nearly all squadron members apply ORM principals to daily tasks. The unit has incorporated ORM into their daily on and off-duty lives. Knowledge of ORM application is widespread and evident.

1.2.3.2. EXCELLENT: Basic requirements of SATISFACTORY rating plus: Top10 unit hazards have been identified and specified control measures adopted to reduce risk of operation(s). Unit personnel queried were able to identify the 6 step process used in an effective ORM program. ORM focus days are used to make substantial improvements to unit processes.

1.2.3.3. SATISFACTORY: Unit has an established written ORM program which effectively identifies risk and provides system for feedback to supervisors for elevated risk. The Commander has an ORM policy letter and the unit has assigned an ORM POC that has been trained by the Wing ORM POC. Personnel are aware of unit's ORM program and are encouraged to identify ORM issues. ORM focus days are tracked in the unit's ORM program folder.

1.2.3.4. UNSATISFACTORY: Unit has not established written ORM program which effectively identifies risk and provides system for feedback to supervisors for elevated risk. There is no Commander's policy letter on ORM, or unit has not assigned and trained an ORM POC.

1.2.4. Hazard Reporting: This category reflects an average overall assessment of both the Flight and Ground Hazard Reporting ratings.

1.2.5. Training: This category reflects an average overall assessment of the Ground, Weapons, and Flight training ratings.

Chapter 2

GROUND SAFETY PROGRAM

2.1. MISHAP REPORTING: Evaluated on three duty day reporting window. All (on- and off-duty) mishaps involving military personnel and on-duty civilian mishaps, including injuries, occupational exposures, and property damage, on or off base, must be reported to wing safety. Near-miss reporting is encouraged. Initial reports may be telephonic, E-Mail, FAX, or AMC Form 441. Ratings are based on the following criteria for initial reporting:

2.1.1. OUTSTANDING	95% - 100%
2.1.2. EXCELLENT	85% - 94%
2.1.3. SATISFACTORY	75% - 84%
2.1.4. MARGINAL	70% - 74%
2.1.5. UNSATISFACTORY	69% or lower

2.2. HAZARD REPORTING (AF Form 457): In this section the availability of AF Form 457, **USAF Hazard Report**, unit personnel's knowledge of the USAF Hazard Reporting system, and timeliness and adequacy of corrective action taken on Hazard Reports forwarded to the unit (OPR) for action is evaluated. The reference is AFI 91-202, Chapter 4. *NOTES:* If no AF Form 457s, USAF Hazard Reports, have been forwarded to the unit for action, this sub-element will be rated N/A. Risk Assessment Code (RAC) 1 hazards are treated as Immediately Dangerous to Life and Health (IDLH). Operations will be terminated immediately until worker exposure, severity of injury, or protection of workers results in the RAC being reduced to a RAC 2 or 3.

2.2.1. **OUTSTANDING:** Hazard Reports are available (posted) to personnel within each duty section (personnel must not have to ask for a hazard report). Hazard reporting instructions are posted with the AF Form 457s. All personnel are aware that an attempt should be made to correct the problem at the lowest level before submission of an AF Form 457. The Safety Office has not received a report of a hazardous condition that could have been abated by the unit with minimal impact since the previous annual assessment. Personnel are aware that hazard reports may be submitted anonymously to the safety office. Abatement actions taken by the OPR were completed almost immediately. If the abatement actions were beyond the scope of the unit to complete or abatement actions would exceed 30 days, an AF Form 3, **USAF Hazard Abatement Log** was completed by the unit and forwarded to the Wing Safety Office for inclusion in the installation Master Hazard Abatement Log. When serious hazards cannot be abated immediately upon receipt, the unit has conducted an ORM assessment to consider additional ways (besides interim control measures offered on the hazard report), in which to reduce worker exposure from serious to minor. When completed, the ORM assessment was forwarded to the Wing Safety Office for review. The unit has conducted a unit-wide inspection to determine that similar safety hazards do not exist. The results of this inspection were forwarded to the Wing Safety Office for distribution to other units. The commander has prioritized the abatement of this serious hazard above all other projects.

2.2.2. **EXCELLENT:** Hazard Reports are available (posted) on unit safety bulletin boards in a common area (personnel must not have to ask for a hazard report). Hazard reporting instructions are posted with the AF Form 457s. The majority of personnel are aware that an attempt should be made to

correct the problem at the lowest level before submission of an AF Form 457. Personnel are aware that hazard reports may be submitted anonymously to the safety office. Abatement actions taken by the OPR were completed in an effective manner prior to the suspense established by AFIs and OSHA (30 days for serious RAC 2 and 3 hazards). If the abatement actions were beyond the scope of the unit to complete or abatement actions would exceed 30 days, an AF Form 3, **USAF Hazard Abatement Log** was completed by the unit and forwarded to the Wing Safety Office for inclusion in the installation Master Hazard Abatement Log. When serious hazards cannot be abated immediately upon receipt, the unit has conducted an ORM assessment to consider additional ways (besides interim control measures offered on the hazard report), in which to reduce worker exposure. When completed, the ORM assessment was forwarded to the Wing Safety Office for review. The commander has prioritized the abatement of this serious hazard above all other projects.

2.2.3. **SATISFACTORY:** Hazard Reports are available (posted) to personnel in a common area (personnel must not have to ask for a hazard report). Hazard reporting instructions are posted with the AF Form 457s. Personnel are aware that hazard reports may be submitted anonymously to the safety office. Abatement actions taken by the OPR were completed in an effective manner within the suspense established by AFIs and OSHA (30 days for serious RAC 2 and 3 hazards). If the abatement actions were beyond the scope of the unit to complete or abatement actions would exceed 30 days, an AF Form 3, **USAF Hazard Abatement Log** was completed by the unit and forwarded to the Wing Safety Office for inclusion in the installation Master Hazard Abatement Log. The commander has prioritized the abatement of this serious hazard above all other projects.

2.2.4. **MARGINAL:** Hazard Reports are available (posted) to personnel in a common area but not in a prominent location (personnel must not have to ask for a hazard report). Hazard reporting instructions are posted with the AF Form 457s. Abatement actions taken by the OPR were completed in an effective manner but not within the suspense established by AFIs and OSHA (30 days for serious RAC 2 and 3 hazards). The unit submitted an AF Form 3, **USAF Hazard Abatement Log**, after the 30 day suspense. The commander has prioritized the abatement of this serious hazard but not above other projects.

2.2.5. **UNSATISFACTORY:** Fails to meet requirements for “Marginal.”

2.3. ADEQUACY AND TIMELINESS OF ACTIONS TAKEN: Elements 2.3.1. through 2.3.3. will be individually rated based on established suspenses, follow-up action taken on Program Management discrepancies, and quarterly updates on risk assessment code items.

2.3.1. **SAFETY AND HEALTH PROGRAM MANAGEMENT DEFICIENCIES:** This section will be reviewed for action taken on program management deficiencies identified during the previous year’s annual assessment. If there were no program deficiencies identified during the previous assessment, this element will be N/A.

2.3.1.1. **OUTSTANDING:** The unit eliminated identified safety program deficiencies from the last assessment within 30 days and no repeat deficiencies were identified during the current assessment. Corrective actions designed to eliminate program deficiencies have demonstrated long term results in that no element is currently rated lower than the previous assessment’s rating. Additionally, the unit took action to improve elements rated as satisfactory during the last assessment. The unit provided the safety office with weekly updates indicating status of corrective actions. Between assessments, close contact is maintained with the safety office to determine any negative trends and immediate actions are implemented to reverse these trends.

2.3.1.2. EXCELLENT: The unit eliminated identified safety program deficiencies from the last assessment within 60 days and no repeat deficiencies were identified during the current assessment. Corrective actions designed to eliminate program deficiencies were effective and have demonstrated long term results. The unit provided the safety office with monthly updates indicating status of corrective actions. Between assessments, close contact is maintained with the safety office to determine any negative trends.

2.3.1.3. SATISFACTORY: Identified safety program deficiencies have been corrected since the last assessment and there were no repeat deficiencies identified. Corrective actions designed to eliminate program deficiencies were effective. The unit provided the safety office with updates indicating status of corrective actions.

2.3.1.4. MARGINAL: The majority of program deficiencies identified during the last assessment have been closed. Minor (non-hazard producing) program deficiencies from the last assessment remain open but improvement is evident. Deficiencies in Confined Space or Lockout/Tagout programs that may affect worker health or safety must be closed within 30 days.

2.3.1.5. UNSATISFACTORY: The majority of program deficiencies remain open and no improvement was noted. No evidence of leadership emphasis is evident.

2.3.2. SAFETY AND HEALTH INSPECTION HAZARDS/DEFICIENCIES: This element will include a review of the adequacy and timeliness of actions taken on facilities/work practice hazards and deficiencies identified during the inspection process (Annual and Spot inspections). NOTE: If there were no open hazards or deficiencies identified during the previous annual inspection and no hazards were identified during spot inspections, this element will not be rated. RAC 1 hazards are treated as Immediately Dangerous to Life and Health (IDLH). Operations will be terminated immediately until worker exposure, severity of injury, or protection of workers results in the RAC being reduced to a RAC 2 or 3.

2.3.2.1. OUTSTANDING: No RAC 1 or 2 hazards were identified during the reporting period. All RAC 3 hazards(within the scope of the unit to abate) were permanently abated within 30 days and an AF Form 3 was submitted on each hazard not within the unit's scope to abate. RAC 3 hazards not within the scope of the unit to abate are on the commander's priority list and have been elevated to the group commander. Identified hazards were distributed throughout the unit and an inspection was accomplished to ensure similar hazards were identified. Self-identified hazards have been given high priority for abatement and Wing Safety has been notified of these self-identified hazards. RAC 4 and 5 hazards not abated within 30 days have been placed on the commander's priority list above all non-safety related projects.

2.3.2.2. EXCELLENT: Hazard suspenses have been met within the required timelines. No RAC 1 hazards were identified during the reporting period. All RAC 2 and 3 hazards within the scope of the unit to abate were abated within 30 days. RAC 2 and 3 hazards that were not within the scope of the unit to abate have been investigated fully and temporary actions implemented to reduce the risk to personnel until permanent abatement actions are complete. All RAC 2 and 3 hazards not within the scope of the unit to abate are on the commander's priority list and have been elevated to the group commander. AF Form 3, **USAF Hazard Abatement Log**, has been initiated on each unabated RAC 2 and 3 hazard and forwarded to Wing Safety for inclusion in the installation Master Hazard Abatement Program. All RAC 4 hazards are on the commander's priority list.

2.3.2.3. **SATISFACTORY:** The majority of suspenses have been met within required timelines. All RAC 1 hazards have been mitigated/abated, or the operation suspended immediately. RAC 2 and 3 hazards have been investigated fully and temporary actions implemented to reduce the risk to personnel until permanent abatement actions are complete. All RAC 2 and 3 hazards within the scope of the unit to abate are on the commander's priority list and have been elevated to the group commander. AF Form 3s, **USAF Hazard Abatement Logs**, have been initiated and forwarded to wing safety for inclusion in the installation Master Hazard Abatement Program. Wing safety has been provided updates periodically.

2.3.2.4. **MARGINAL:** RAC 2 and 3 hazards within the scope of the unit to abate were abated, but not within 30 days as required by AFOSH and OSHA. RAC 4 and 5 hazards have not been prioritized above non-safety related projects on the unit commander's priority list. Suspenses have not been met and updates require wing safety to query the unit for a response.

2.3.2.5. **UNSATISFACTORY:** RAC 2 and/or 3 hazard abatement actions (within the scope of the unit) took longer than 90 days to complete. RAC 4 and 5 hazards have not been prioritized above non-safety related projects on the unit commander's priority list.

2.3.3. **MISHAP REPORTS:** This will include reviewing follow-up action taken on mishap report recommendations where the unit is the OPR for corrective action. If no mishap reports were forwarded to the unit for action this element will not be rated. **NOTE:** Due to the necessity of timely action to prevent the recurrence of mishaps the OUTSTANDING and MARGINAL ratings are dropped from this element.

2.3.3.1. **EXCELLENT:** Recommended actions taken were initiated in a timely manner, were comprehensive and designed to prevent recurrence. Actions taken were publicized throughout the unit for mishap prevention purposes. All suspenses were met.

2.3.3.2. **SATISFACTORY:** Recommended actions taken were comprehensive and designed to prevent recurrence. The majority of suspenses have been met within required timelines.

2.3.3.3. **UNSATISFACTORY:** Recommendations were not followed or implemented in a timely manner but alternative actions resulted in a short-term fix. The unit took little or no action. Further incidents have occurred similar in nature to the original mishap.

2.4. TRAFFIC SAFETY PROGRAM: This section will reflect an overall rating based on results in elements [2.4.1.](#) through [2.4.3.](#)

2.4.1. **OCCUPANT RESTRAINT PROGRAM:** The rating will include evaluation of unit's written guidance, how well the unit is monitoring occupant restraint compliance, and occupant restraint monitoring accomplished during the annual wing inspection.

2.4.1.1. **OUTSTANDING:** The unit has established an occupant restraint program as part of the overall unit traffic safety program. Spot inspections for occupant restraint compliance are conducted in unit controlled areas at least twice monthly and results are documented in the USR continuity book. Unit compliance rates are distributed to unit personnel. The unit commander and supervisors continually emphasize the importance of vehicle restraint systems. No Government Motor Vehicle (GMV) violations were noted within the inspection period. Private Motor Vehicle (PMV) usage rates during the inspection period were 95 percent or above. The unit has established a program to educate personnel identified as non-compliant. The unit provides a pre-departure

safety briefing to all personnel under 26 years of age who are departing on leave or TDY (when the mode of transportation is a PMV).

2.4.1.2. EXCELLENT: The unit has established an occupant restraint program as part of the overall unit traffic safety program. Spot inspections for occupant restraint compliance are conducted in unit controlled areas at least monthly and results are documented in the USR continuity book. Unit compliance rates are distributed to unit personnel. The unit commander emphasizes the importance of vehicle restraint systems. No Government Motor Vehicle (GMV) violations were noted within the unit during the inspection period. Private Motor Vehicle (PMV) usage rates during the inspection period were 90 percent or above.

2.4.1.3. SATISFACTORY: The unit has established an occupant restraint program as part of the overall unit traffic safety program. Spot inspections for occupant restraint compliance are conducted in unit controlled areas once a quarter and results are documented in the USR continuity book. Unit compliance rates are distributed to unit personnel. GMV usage rates are 95 percent or above. PMV usage rates are 80 percent or above.

2.4.1.4. MARGINAL: The unit has established an occupant restraint program as part of the overall unit traffic safety program. Spot inspections for occupant restraint compliance are conducted in unit controlled areas less than once a quarter. Results are documented in the USR continuity book but unit rates are not distributed to unit personnel. Lack of commander emphasis is evident. GMV usage rates are below 95 percent. PMV usage rates are below 80 percent.

2.4.1.5. UNSATISFACTORY: Fails to meet requirements for "Marginal."

2.4.2. MOTORCYCLE (M/C) SAFETY PROGRAM: Rating is based on whether the unit is monitoring training (Motorcycle Safety Foundation) of licensed motorcycle operators and monitoring of personal protective equipment usage.

2.4.2.1. OUTSTANDING: The unit has established a M/C safety program as part of the overall unit traffic safety program. The unit identifies M/C operators during initial in-processing, ensures the identified M/C operator has completed a recognized (approved) hands-on safety course (listed below), and logs the operator's information (including course completion date and course location) into the unit's records. The unit forwards this information to the 319 ARW Safety office. M/C operators are informed of GFAFB Personal Protective Equipment (PPE) requirements. Information identifying the requirement for all active duty military personnel to attend a recognized hands-on training course before operating a motorcycle is provided to all incoming personnel. *NOTE:* This applies to all active duty personnel, whether on or off duty, on or off base. Prior to and continuously throughout the motorcycle riding season, emphasis is placed on motorcycle safety. The unit has established a program to educate M/C operators violating PPE or safe operating practices. Motorcycle safety information is posted on unit/shop bulletin boards. No unsafe practices or PPE violations are noted during the assessment.

2.4.2.2. EXCELLENT: The unit has established a M/C safety program as part of the overall unit traffic safety program. The unit identifies M/C operators during initial in-processing, ensures the identified M/C operator has completed a recognized (approved) hands-on safety course (listed below), and logs the operator's information (including course completion date and course location) into the unit's records. The unit forwards this information to the 319 ARW Safety office. M/C operators are informed of GFAFB PPE requirements. Information identifying the requirement for all active duty military personnel to attend a recognized hands-on training course before oper-

ating a motorcycle is provided to all incoming personnel. **NOTE:** This applies to all active duty personnel, whether on or off duty, on or off base. Prior to and periodically throughout the motorcycle riding season, emphasis is placed on motorcycle safety.

2.4.2.3. **SATISFACTORY:** The unit has established a M/C safety program as part of the overall unit traffic safety program. The unit identifies M/C operators during initial in-processing, ensures the identified M/C operator has completed a recognized (approved) hands-on safety course (listed below), and logs the operator's information (including course completion date and course location) into the unit's records. The M/C operators are informed of GFAFB PPE requirements. Information identifying the requirement for all active duty military personnel to attend a recognized hands-on training course before operating a motorcycle is provided to all incoming personnel. **NOTE:** This applies to all active duty personnel, whether on or off duty, on or off base. Prior to motorcycle riding season, emphasis is placed on motorcycle safety.

2.4.2.4. **MARGINAL:** The unit has established a M/C safety program as part of the overall unit traffic safety program but does not identify M/C operators during initial in-processing. The unit ensures the identified M/C operator has completed a recognized (approved) hands-on safety course (listed below) but does not maintain the operator's information in the unit's records.

2.4.2.5. **UNSATISFACTORY:** Fails to meet requirements for "Marginal."

2.4.3. M/C SAFETY COURSES RECOGNIZED (APPROVED) BY THE AIR FORCE

2.4.3.1. Motorcycle Safety Foundation (MSF): Motorcycle Rider Course (MRC)

2.4.3.2. Experienced Rider Course (ERC)

2.4.3.3. California Motorcyclist Safety Program (CMSP): Motorcycle Rider Course (MRC)

2.4.3.4. Experienced Rider Course (ERC)

2.4.3.5. American Bikers Aimed Toward Education (ABATE): Motorcycle Rider Course (MRC)

2.4.3.6. Experienced Rider Course (ERC)

2.4.4. M/C TRAINING COURSES NO LONGER RECOGNIZED BY THE AIR FORCE

2.4.4.1. Motorcycle Operator's Safety Training (MOST)

2.4.4.2. Motorcycle Operator's Safety Training II (MOST II)

2.4.4.3. Better Biking Course (BBC)

2.4.5. **ALL TERRAIN VEHICLE (ATV) PROGRAM:** Rating is based on whether the unit has ATVs assigned and if all operators have completed the required Specialty Vehicle Institute of America (SVIA) training.

2.4.5.1. **OUTSTANDING:** The unit has established an ATV safety program as part of the overall traffic safety program. Operators are identified and scheduled to attend the SVIA course conducted by the 319 SFS if they have not previously attended and possess a completion card. A list of qualified operators is maintained in the USR continuity book. Required personal protective equipment (PPE, see AFI 91-207) is issued to each operator and inspected at least monthly for serviceability, cleanliness, and proper storage. PPE usage is rigidly enforced. ATV operating rules are posted on bulletin boards in each section where ATVs are used. USRs conduct monthly spot inspections of ATV operations including a visual inspection of the ATVs for damage and observa-

tions of riding practices (if practical). Errant operators are suspended from operating ATVs. No unlicensed operators have been identified since the last assessment.

2.4.5.2. EXCELLENT: The unit has established an ATV safety program as part of the overall traffic safety program. Operators are identified and scheduled to attend the SVIA course conducted by the 319 SFS if they have not already attended and passed. A list of qualified operators is maintained in the USR continuity book. Required PPE (see AFI 91-207) is issued to each operator and inspected at least quarterly for serviceability, cleanliness, and proper storage. PPE usage is rigidly enforced. USRs conduct quarterly spot inspections of ATV operations including a visual inspection of the ATVs for damage and observations of riding practices (if practical). Errant operators are suspended from operating ATVs. No unlicensed operators have been identified since the last assessment.

2.4.5.3. SATISFACTORY: The unit has established an ATV safety program as part of the overall traffic safety program. Operators are identified and scheduled to attend the SVIA course conducted by the 319 SFS if they have not already attended and passed. Required PPE (see AFI 91-207) is issued to each operator. PPE usage is enforced. No unlicensed operators have been identified since the last assessment.

2.4.5.4. MARGINAL: The unit has established an ATV safety program as part of the overall traffic safety program. Required PPE (see AFI 91-207) is shared by operators. ATVs show signs of abuse (cracked or broken parts, flat tires, scrapes and scratches). Licensed operators have been observed violating ATV operating rules or have been observed without all required PPE.

2.4.5.5. UNSATISFACTORY: The unit has not established an ATV program as part of their traffic safety program or an unqualified/unlicensed individual has been observed operating an ATV.

2.5. INJURY EXPERIENCE: No rating. Statistical ratings provided are based on OSHA rates for civilian injuries (when applicable).

2.5.1. CIVILIAN INJURIES: Civilian injuries will be given in raw numbers and also the rate per 100 employees as used by the United States Department of Labor (USDOL) Occupational Safety and Health Administration (OSHA) to target USAF installations for inspections. The rate will reflect statistical data (injuries sustained) based on an inspection to inspection time frame. ***This information should assist you in gauging your unit against the DOL rate of 2.42.*** In addition, the mishap trend section following the figures and rates will highlight any trends by type of injury and/or incidence within one shop/area, or specific cause factor (training/supervisor/etc.).

2.5.1.1. CIVILIAN LOST TIME INJURY: Forecasted rate.

2.5.1.2. CIVILIAN FIRST AID INJURY: Rate.

2.5.1.3. CIVILIAN INJURY TRENDS: Rate.

2.5.2. MILITARY INJURIES (ON-DUTY): Military injuries, both lost time and first aid, on duty and off duty, are reflected as raw numbers only. Figures are once again based on last annual inspection to current inspection.

2.5.2.1. LOST TIME REPORTABLE INJURIES:

2.5.2.2. FIRST AID INJURIES:

2.5.2.3. ON-DUTY TRENDS: Mishap trends identified based upon on duty injuries reported from your last annual inspection to current inspection.

2.5.3. MILITARY INJURIES (OFF-DUTY):

2.5.3.1. LOST TIME REPORTABLE INJURIES:

2.5.3.2. FIRST AID INJURIES:

2.5.3.3. OFF-DUTY TRENDS: Trends identified based on off duty injuries reported from your last annual inspection to current inspection.

2.5.4. PROPERTY DAMAGE (ON-DUTY) MISHAPS: Property damage mishaps will be identified as total numbers experienced since the last assessment.

2.5.4.1. REPORTABLE PROPERTY DAMAGE MISHAPS:

2.5.4.2. NON-REPORTABLE PROPERTY DAMAGE MISHAPS:

2.5.4.3. PROPERTY DAMAGE TRENDS:

2.6. AFOSH TRAINING AND DOCUMENTATION: Rating is based on documentation of worker's safety and health training on AF Forms 55, **Employee Safety and Health Record** throughout the organization and a review of shop specific training outlines for each workcenter. Reference is AFI 91-301. **NOTE:** Due to the importance of proper training in the prevention of mishaps, this area will be rated SATISFACTORY or UNSATISFACTORY only.

2.6.1. SATISFACTORY: AF Form 55s are maintained on all personnel (with the exception of workers listed in paragraph 7.3.2, AFI 91-301). Personnel have been provided training on all subjects listed on the AF Form 55. Section supervisors have developed written workplace-specific training guides and trained personnel on the operation and maintenance (including Lockout/Tagout procedures) of, hazards associated with, and required PPE for all powered equipment, machinery, and tools. Written guidance includes local environmental factors and out-of-workplace job site hazards. Training is documented on the individual's AF Form 55. In addition to Federal HAZCOM training, supervisors have developed written training plans, trained personnel, and documented training of workplace-specific HAZCOM training. This training must include all hazardous chemicals the worker may use or be exposed to in his/her duties, location of Material Safety Data Sheets (MSDSs), routes of entry, target organs, PPE requirements, compatibility and storage, and emergency procedures. Whenever a procedure is changed, new tools, equipment, or new chemical is received, the appropriate training guide is updated, workers are trained, and the training documented on the AF Form 55. Separate "special" job training such as Control of Hazardous Energy (Lockout/Tagout), Powder Actuated Tools, and Permit-required Confined Space Training will be provided using separate written training guides and that training will be documented as a separate entry on the AF Form 55. Required annual training is provided and documented.

2.6.2. UNSATISFACTORY: Fails to meet requirements for SATISFACTORY.

2.7. SUPERVISOR'S SAFETY TRAINING (SST): This rating is based on how well the unit monitors SST Training. Are individuals who require training scheduled and is training documented on AF Forms 55 after completion? For additional information on Supervisor Safety Training refer to AFI 91-301.

2.7.1. **OUTSTANDING:** The unit tracks newly assigned (new arrivals, recently promoted) supervisors to ensure these individuals receive SST. The unit consistently schedules individuals for monthly training based on the numbers of unit personnel requiring training. No personnel require training at the time of the assessment. Supervisors annotate training on the individual's AF Form 55 and monitor performance. Supervisors that exhibit less than satisfactory safety knowledge or performance are rescheduled for SST.

2.7.2. **EXCELLENT:** The unit tracks newly assigned (new arrivals, recently promoted) supervisors to ensure these individuals receive SST. The unit consistently schedules individuals for monthly training based on the numbers of unit personnel requiring training. A small number of personnel (based on unit assigned strength) require training at the time of the assessment. Supervisors annotate training on the individual's AF Form 55.

2.7.3. **SATISFACTORY:** The unit tracks newly assigned (new arrivals, recently promoted) supervisors to ensure these individuals receive SST. The unit schedules individuals monthly based on the numbers of unit personnel requiring training. Supervisors annotate training on the individual's AF Form 55.

2.7.4. **MARGINAL:** The unit has failed to schedule individuals for monthly training based on the numbers of unit personnel requiring training, but is working to make up the training through commander involvement and additional classes. The unit has failed to schedule sufficient personnel for monthly training courses compared with total personnel requiring training.

2.7.5. **UNSATISFACTORY:** Fails to meet requirements for "Marginal."

2.8. CONTROL OF HAZARDOUS ENERGY PROGRAM (LOCK OUT/TAG OUT): This rating is based on unit requirement, training, documentation, and implementation IAW OSHA 1910.145, OSHA 1910.147, and AFOSH Std 127-45.

2.8.1. **SATISFACTORY:** The unit has ensured that each affected duty section has established a written Lockout/Tagout (LOTO) Program (a standardized written unit program with shop specific additions will suffice) that fulfills the requirements of AFOSH Standard 91-45, AFI 91-301, OSHA Standard 1910.145, and 1910.147. Included in the written program will be a list of permanently installed powered machinery, equipment, and or systems subject to LOTO. The equipment list will include the make, model, serial number, nomenclature, and location of the equipment/system. Also, list hazards and energy sources (including residual stored energy) associated with each machine, hazards, and authorized maintenance personnel (authorized to lockout/tagout). List whether the machine has lockable power source(s). **NOTE:** Machines, equipment, and systems may have more than one type of energy to lock out (Refer to Attachment 3, AFOSH Std 91-45 for further guidance). Individual locks must be issued to personnel authorized to lockout equipment. Locks must be numbered and/or color coded with the lock's identification entered on the Authorized to Perform Lockout/Tagout list maintained by the supervisor. The only key available for these locks will be maintained by the individual. Extra keys will be destroyed. When lockout devices are installed, a fully filled out AF Form 979, Danger Tag, will be attached at the same point as the lockout device. The shop supervisor will maintain a lockout/tagout list to track when equipment is locked or tagged out. The supervisor will notify the safety office of lockout/tagout application unless exempted by the AFOSH Standard. All personnel within each duty section will be given LOTO familiarization training to acquaint them with the meaning of AF Form 979 and other Danger and Do Not Start tags. Likewise, all personnel will be briefed whenever LOTO has been applied within a duty section.

2.8.2. UNSATISFACTORY: Fails to meet requirements for “Satisfactory.”

2.9. CONFINED SPACE ENTRY PROGRAM: This rating is based on the unit’s requirement for a Confined Space Entry program. This will include implementation, documentation and training as referenced in OSHA 1910.146, AFOSHSTD 91-25, and 319 ARW Operation Instruction 91-25. Examples of confined spaces would include, but are not limited to the sewer systems, bulk fuel storage tanks, oil/water separators, electrical vaults, fuel valve and drain pits, water tanks, and other specified structures.

2.9.1. SATISFACTORY: Unit has established a written confined space program including the following elements:

2.9.1.1. Written Entry Procedures and Master Entry Plan (MEP) with current annual confined space entry program team (CSEPT) approval document.

2.9.1.2. Written workcenter specific confined space attendant/entry/supervisor training plans.

2.9.1.3. Complete list of qualified personnel trained in attendant/entrant/supervisor/cpr/rescue/atmospheric testing/respirator.

2.9.1.4. Complete list of unit owned confined spaces.

2.9.1.5. Complete list of unit owned confined space equipment (tri-pod, testers, body harness, etc.).

2.9.1.6. Written pre-entry checklists.

2.9.1.7. Blank entry permits for permit required confined spaces.

2.9.1.8. Written emergency response plan.

2.9.1.9. Unit has appointed, in writing, a primary and alternate confined space entry program team (CSEPT) member to the Wing Safety Office.

2.9.1.10. Unit forwards a copy of all completed confined space entry permits (AF Form 1024) to Wing Safety and maintains a unit copy for one year.

2.9.1.11. Unit maintains a log of all non-permit required space entries for one year.

2.9.1.12. Also, no unauthorized or untrained personnel are observed entering a confined space during the assessment period (1-year) and no entries are observed during the assessment period (1-year) which violate the unit written entry procedures, MEP, AFOSH Std. 91-25, and/or OSHA Standard 29 CFR 1910.146.

2.9.2. UNSATISFACTORY: Unit written confined space program is missing one or more items listed above. Unauthorized or untrained personnel are observed entering a confined space during the assessment period (1-year). Unit entries are observed to be in violation of the written entry procedures, MEP, AFOSH Std. 91-25 or OSHA Std. 29 CFR 1910.146.

2.10. PERSONAL PROTECTIVE EQUIPMENT (PPE): Rating is based on unit requirement for PPE, training, accessibility, storage, maintenance, use, and enforcement. For further information on PPE requirements refer to AFOSHSTD 91-31. Examples of PPE are: gloves, goggles, face shields, aprons, harnesses, hard hats, steel toe boots, respirators, etc.

2.10.1. OUTSTANDING: Supervisors have performed a Job Safety Analysis (JSA) on all hazardous tasks employees may encounter in day-to-day work activities. Supervisors have performed a JSA on

all non-routine tasks their employees may be subject to perform. Supervisors have developed and utilize written lesson plans for PPE training. Supervisors have contacted appropriate agencies (Health, Fire, Safety) and attempted to eliminate tasks or mitigate hazardous conditions by engineering changes, product substitution, or worker isolation. Supervisors have identified PPE required to be used to perform tasks not permanently abated. Employees have been issued PPE, taught proper care and usage, and provided a proper storage location. Issued PPE is being stored properly, all items are in serviceable condition, and employees exhibit comprehensive knowledge of PPE selection criteria and source documents. General use PPE (versus individual issue) is stored properly and cleaning materials (alcohol swabs, etc.) are available. Supervisors and leadership enforce PPE usage, to include disciplinary measures for repeat noncompliance. No cases of noncompliance have been noted since the last inspection by safety or health personnel. **NOTE:** In cases of employee failure to utilize PPE, documentation is essential.

2.10.2. EXCELLENT: Shop supervisors have performed Job Safety Analysis (JSA) on the majority of hazardous tasks employees may encounter in day-to-day work activities. Supervisors have analyzed day-to-day hazardous and some non-routine tasks their employees are subject to perform and identified PPE required to be used to perform those tasks. Employees have been issued PPE, taught proper care and usage, and provided a proper storage location. Issued PPE is being stored properly, all items are in serviceable condition, and employees exhibit comprehensive knowledge of PPE selection criteria and source documents. General use PPE (versus individual issue) is stored properly and cleaning materials (alcohol swabs, etc.) are available. PPE use is enforced but cases of repeated failure do not result in verifiable disciplinary action. Few cases of noncompliance have been observed since the last assessment by safety or health personnel.

2.10.3. SATISFACTORY: Shop supervisors have analyzed hazardous tasks their employees are subject to perform routinely and identified PPE required to be used to perform those tasks. Employees have been issued PPE, taught proper care and usage, and provided a proper storage location. Issued PPE is being stored properly and the majority of items are in serviceable condition. General use PPE (versus individual issue) is stored properly and cleaning materials (alcohol swabs, etc.) are available. Workers state that the supervisor enforces PPE use verbally. No cases of noncompliance are noted by safety or health personnel during the inspection.

2.10.4. MARGINAL: Shop supervisors have analyzed some day-to-day activities for PPE requirements but rely mainly on in-place work practices and employee judgement. Employees have been issued PPE but are given cursory training in care and usage. Issued PPE is not being stored or maintained properly and general condition is poor. General use PPE is available but no cleaning materials are provided. Personnel are not knowledgeable about PPE selection but understand it is required. Supervisors mention PPE occasionally but do not enforce usage.

2.10.5. UNSATISFACTORY: Shop supervisors have failed to analyze day-to-day activities for PPE requirements and rely totally on in-place work practices and employee judgement. Employees have not been issued required PPE but must rely on general use (multi-use) PPE. PPE is not being stored or maintained properly and general condition unserviceable. General use PPE is available but no cleaning materials are provided. Personnel are not knowledgeable about PPE selection. Supervisors fail to enforce PPE usage and that failure may result in personal injury to an employee.

2.11. UNIT SAFETY REPRESENTATIVE CONTINUITY: This rating is based on how well the unit assigns and utilizes the Unit Safety Representative (USR) position. Recommend the following guidelines

be followed when considering appointment of a USR: Larger organizations should consider assigning a full time safety individual whose primary duty is unit safety. Individuals appointed should be in the grade of E-6 or above and hold a 7-level (5-level minimum). Individuals should have a minimum of 12 months retainability. For continuity purposes the duration of appointment should be one year or longer. In addition, multiple USRs may be selected to allow for extended TDYs.

2.11.1. **OUTSTANDING:** The unit selects USRs based on knowledge and interest. The unit has designated (in writing) a primary and alternate USR (both of which are grade E-6 or higher) and ensured both the primary and alternate receive required training from the wing ground safety office within 30 days of appointment. Personnel appointed as USRs should have at least 18 months retainability at the time of appointment. USRs' names are recognized by all unit personnel queried. A change in USRs is accomplished with at least one week overlap when practical. Posters or letters with the USRs' names, photos, and duty phone numbers are posted on all safety bulletin boards in the unit. The commander gives the USR full support and authority in matters of safety. Monthly meetings are held between the USRs and unit leadership. USRs are active and interact with the ground safety office more than once a month. Leadership ensures a safety POC is available at all times. Alternate safety POCs may be appointed to ensure availability.

2.11.2. **EXCELLENT:** The unit has designated (in writing) a primary and alternate USR (at least one of which is grade E-6 or higher) and ensured both the primary and alternate receive required training from the wing ground safety office within 30 days of appointment. Personnel appointed as USRs have at least 18 months retainability at the time of appointment. Unit safety representatives' names are recognized by the majority of unit personnel queried. Posters or letters with the USRs' names and duty phone numbers are posted on safety bulletin boards throughout the unit. The commander gives the USR support and authority in matters of safety. Regular meetings are held between the USRs and unit leadership. USRs are active and interact with the ground safety office at least monthly.

2.11.3. **SATISFACTORY:** The unit has designated (in writing) a primary and alternate USR but only the primary has received required training from the wing ground safety office within 30 days of appointment. Personnel appointed as USRs have at least 12 months retainability at the time of appointment. Unit safety representatives' names are recognized by unit personnel queried. Posters or letters with the USRs' names and duty phone numbers are posted on safety bulletin boards. The commander gives the USR support and authority in matters of safety.

2.11.4. **MARGINAL:** The unit has designated (in writing) a primary and alternate USR but failed to ensure both the primary and alternate receive required training from the wing ground safety office within 30 days of appointment. Unit safety representatives' names are recognized by a minority of unit personnel queried. Posters or letters with the USRs' names and duty phone numbers are not posted on safety bulletin boards. The commander gives the USR cursory support and little authority in matters of safety.

2.11.5. **UNSATISFACTORY:** The unit has failed to designate (in writing) a primary and alternate USR and failed to ensure both the primary and alternate receive required training from the wing ground safety office within 30 days of appointment. Personnel appointed as USRs are appointed without consideration for retainability. Unit safety representatives' names are not recognized by any unit personnel queried. Posters or letters with the USRs' names and duty phone numbers are not posted on safety bulletin boards. The commander gives the USR no support or authority in matters of safety.

2.12. UNIT SAFETY REPRESENTATIVE (USR): The overall rating is based on the evaluation of elements 2.12.1. through 2.12.4.

2.12.1. USR TRAINING: Satisfactory or Unsatisfactory based on whether appointed USRs are trained within 30 days of appointment.

2.12.2. USR MEETING ATTENDANCE: The overall rating is based on the number of scheduled meetings attended by the USR or appointed representative.

2.12.2.1. EXCELLENT: 4 of 4 meetings attended.

2.12.2.2. SATISFACTORY: 3 of 4 meetings attended.

2.12.2.3. UNSATISFACTORY: 2 or less meetings attended.

2.12.3. SPOT INSPECTIONS: This rating is based on the frequency and scope of inspections conducted by the unit. The program is overseen by the USR.

2.12.3.1. OUTSTANDING: All unit work centers receive monthly spot inspections for safety conducted by the USR and/or shop supervisor. Documentation of findings and corrective actions is complete and comprehensive. Unit developed safety checklists are available for each work center and utilized during spot inspections. Checklists are complete, comprehensive, and work center specific.

2.12.3.2. EXCELLENT: All unit work centers receive quarterly spot inspections conducted by the USR and/or shop supervisor. Documentation of findings and corrective actions is complete and comprehensive. Unit developed safety checklists are available for each work center and utilized during spot inspections. Checklists are complete, comprehensive, and work center specific.

2.12.3.3. SATISFACTORY: All unit work centers receive a spot inspection, conducted by the USR and/or shop supervisor, at least semi-annually. Documentation of findings and corrective actions is complete. A unit developed safety checklist is available for use during spot inspections. Checklists are generic in nature and all-encompassing.

2.12.3.4. MARGINAL: Most unit work centers receive a spot inspection, conducted by the USR and shop supervisor, semi-annually. Documentation of findings and corrective actions is conducted.

2.12.3.5. UNSATISFACTORY: Unit work centers receive an annual spot inspection conducted by the USR and shop supervisor. Documentation of findings and corrective actions is not accomplished.

2.12.4. UNIT SAFETY PROGRAM MANAGEMENT BOOK: Rating is based on compliance with program requirements, maintaining up-to-date materials, and current publication use and availability.

2.12.4.1. OUTSTANDING: The USR maintains a comprehensive program management book including the following mandatory and optional items.

2.12.4.1.1. MANDATORY:

2.12.4.1.2. A current commander's appointment letter for the primary and alternate USR.

2.12.4.1.3. A copy of the USR training verification letter.

2.12.4.1.4. A copy of the previous annual inspection, including corrective actions taken.

- 2.12.4.1.5. A spot inspection log for the unit with documented discrepancies and corrective actions.
- 2.12.4.1.6. A copy of existing CC Safety Policy Letters or OIs.
- 2.12.4.1.7. A listing of AFOSH Standards and AFIs applicable to the unit.
- 2.12.4.1.8. A real property listing of all unit owned facilities.
- 2.12.4.1.9. A copy of all active and closed AF Forms 3 (Hazard Abatement Log) and AF Forms 457 (Hazard Reports).
- 2.12.4.1.10. OPTIONAL:
- 2.12.4.1.11. A copy of Bio-Environmental Engineering (BEE) and Fire Protection Surveys.
- 2.12.4.1.12. A copy of previous USR meeting minutes covering a period of 1 year.
- 2.12.4.1.13. A copy of CC/USR/Unit leadership meeting minutes covering a period of one year.
- 2.12.4.1.14. Documentation of unit conducted safety briefings including topic, date, and personnel briefed.
- 2.12.4.1.15. A copy of CC call meeting minutes highlighting safety topics discussed.
- 2.12.4.1.16. Safety materials and publications available for use in work centers (posters, flyers, etc.)
- 2.12.4.2. EXCELLENT: All mandatory and some of the optional elements listed above.
- 2.12.4.3. SATISFACTORY: All mandatory elements listed above.
- 2.12.4.4. MARGINAL: Most mandatory elements listed above.
- 2.12.4.5. UNSATISFACTORY: Fails to meet requirements for "Marginal."

2.13. FACILITIES AND WORK PRACTICES DISCREPANCIES: No comments made unless trends are observed or discrepancies are noted. Discrepancies noted will include:

- 2.13.1. Findings
- 2.13.2. Risk Assessment Codes (RAC's)
- 2.13.3. Reference
- 2.13.4. Cause
- 2.13.5. Recommendations
- 2.13.6. Action taken and date

2.14. ADDITIONAL COMMENTS: This section will include laudatory or other comments if appropriate.

Chapter 3

WEAPONS SAFETY PROGRAM

3.1. WEAPON SAFETY MANAGEMENT:

3.1.1. ADDITIONAL DUTY WEAPONS SAFETY REPRESENTATIVES (ADWSRs): The overall rating is based on the evaluation of elements 3.1.1. through 3.1.4.

3.1.1.1. ADWSR TRAINING: Satisfactory or Unsatisfactory based on whether appointed ADWSRs are trained within 30 days of appointment.

3.1.1.2. SPOT INSPECTIONS: This rating is based on the frequency and scope of inspections conducted by the unit. The program is overseen by the ADWSR.

3.1.1.2.1. OUTSTANDING: Spot inspections encompass all aspects of explosives operations (storage, handling, and transportation). Entries show the weapons safety process includes fire prevention and occupational safety guidance. Inspections are accomplished beyond required frequency (minimum requirement is quarterly), documented, and corrective actions taken for discrepancies found. All required explosives safety standards are complied with.

3.1.1.2.2. EXCELLENT: Spot inspections include all aspects of explosives operations (storage, handling, and transportation). Inspections are accomplished beyond required frequency (minimum requirement is quarterly), documented, and corrective actions taken for discrepancies found. All required explosives safety standards must be complied with.

3.1.1.2.3. SATISFACTORY: Spot inspections include all aspects of explosives operations (storage, handling, and transportation). Inspections are accomplished at least quarterly, documented, and corrective actions taken for discrepancies found. All required explosives safety standards are complied with.

3.1.1.2.4. MARGINAL: Spot inspections consistently conducted on the same explosives operations. Documentation imprecise or inspection log is not identifying the explosives operation being inspected.

3.1.1.2.5. UNSATISFACTORY: Failure to conduct the minimum required spot inspections.

3.1.1.3. SAFETY MANAGEMENT BOOK: Rating is Satisfactory or Unsatisfactory based on compliance with program requirements, maintaining up-to-date materials, and current publications.

3.1.1.4. ADMINISTRATION: Satisfactory or Unsatisfactory based on accessibility and currency of Air Force explosives safety publications, item technical orders, and applicable standards together with worker awareness of the location of the standards.

3.2. WEAPONS SAFETY TRAINING: This rating is either Satisfactory or Unsatisfactory. If personnel in the unit are current, or are overdue and have been decertified from performing explosives operations, the rating is Satisfactory. If the unit has failed to decertify personnel when overdue training and/or overdue personnel are performing explosives operations, the rating is UNSATISFACTORY. Refer to AFI 91-202.

3.3. STORAGE, HANDLING & HOUSEKEEPING OF MUNITIONS : Rating is Satisfactory or Unsatisfactory based on compliance with explosives safety standards outlined in AFMAN 91-201, item T.O.s, and local publications.

3.4. FACILITIES: Rating is based on condition of storage and maintenance facilities. Discrepancies noted will include Findings, Risk Assessment Codes (RAC's) Reference, Cause, Recommendations, and Action taken and date.

3.5. TRANSPORTATION: Rating is based on compliance with explosive transportation requirements outlined in AFMAN 91-201, and Title 49 Code of Federal Regulations.

Chapter 4

FLIGHT SAFETY PROGRAM

4.1. FLIGHT SAFETY OFFICE MANAGEMENT AND COMMANDER'S SUPPORT: Evaluated on level of proactive risk measurement processes identified in the squadron. Level of commitment towards developing a safety conscious mentality displayed in utilization and accessibility of squadron safety office and squadron staff.

4.1.1. TRAINING: Rating based on whether Squadron Flight Safety Officers (FSO) have attended the FSO Course (WCIP05A) and are aircraft commander or instructor navigator qualified IAW AFI 91-202/AMC1.

4.1.1.1. OUTSTANDING: Squadron FSO is an IP, AC, or IN that is FSO trained and augments Wing safety on a regular basis.

4.1.1.2. EXCELLENT: FSO or AMIC Trained AC or IN that augments Wing Safety on a regular basis.

4.1.1.3. SATISFACTORY: FSO is an AC or Navigator and FSO trained. If unit attempted to obtain FSO training but was unable due to lack of available training slots, should have an AMIC-qualified IP, AC, or IN acting as squadron FSO.

4.1.1.4. MARGINAL: FSO is an AC or Navigator but is not FSO trained.

4.1.1.5. UNSATISFACTORY: Less than an AC or Instructor qualified or non-current in the aircraft.

4.1.2. DEPLOYABLE AS FSO: Rating based on Squadron FSO being a current and qualified crew-member, with all pre-deployment requirements complied with (i.e. shots, physical, dog tags, SAT, etc.) and completeness/currency of deployment guide/mishap investigation kit.

4.1.2.1. Retains a current deployment guide/mishap investigation kit containing FSO Deployment Guide and all regulations IAW AFI 91-202 and AFMAN 91-211.

4.1.2.2. Retains copy of AF PAMPHLET 91-216, USAF SAFETY DEPLOYMENT AND CONTINGENCY PAMPHLET.

4.1.2.3. EXCELLENT: Squadron Safety office maintains a deployment kit which contains AFIs 91-202, 91-204, 91-216, and the AMC Deployed FSO Guide. These regulations may be maintained electronically on CD ROM or disk.

4.1.2.4. SATISFACTORY: FSO is current and qualified and maintains mission ready status.

4.1.2.5. UNSATISFACTORY: FSO is non-current or does not meet mission ready status.

4.1.3. CONTINUITY: Rating based on adequate overlap from previous FSO, and completeness of continuity book.

4.1.3.1. Continuity book contains appointment letters and outlines duties of Safety office staff.

4.1.3.2. Continuity book contains all current AFIs, appointment letters, policy letters, and programs.

4.1.3.3. There has been adequate continuity and overlap IAW AFI 91-202, AMC Sup 1 para. 2.1.2 with the FSO and assistant FSO.

4.1.3.4. EXCELLENT: New FSO worked in the squadron safety office for at least six months and the continuity book is current and useful.

4.1.3.5. SATISFACTORY: The continuity book is up to date and provides adequate guidance. There were at least 10 working days of overlap between the incoming and outgoing FSO.

4.1.3.6. UNSATISFACTORY: The continuity book is not up to date or there is no overlap between FSOs.

4.1.4. **PARTICIPATION:** Rating based on Squadron Commander's participation in Safety program, and inclusion of FSO in squadron staff functions.

4.1.4.1. Squadron FSO attends staff, TRP, SEB meetings (if held) and Review and Certification boards IAW 91-202, AMC Sup 1, para. 7.1.

4.1.4.2. All squadron aircrew members attend Safety meetings.

4.1.4.3. Squadron Commander has an appointment letter and Safety policy letter IAW AFI 91-202, para 2.1.2 and AMC Sup 1, para. 1.8.13.

4.1.4.4. Number of mishaps associated to your squadron/percentage of total flight or flight related mishaps assigned to wing.

4.1.4.5. The Squadron Flight Safety Officer rotated up through the Wing Safety Office to learn Wing duties IAW AFI 91-203, AMC Sup 1, para. 1.2.3.7.

4.1.4.6. AMC Flying Milestone awards (hours tracked, currency of submitting/updating letter IAW AMCI 36-2805).

4.1.4.7. OUTSTANDING: Complies with 4.1.4.1. through 4.1.4.6. and a safety culture is clearly visible in most squadron processes.

4.1.4.8. EXCELLENT: Complies with 4.1.4.1. through 4.1.4.6.

4.1.4.9. SATISFACTORY: Complies with 4.1.4.1. through 4.1.4.4.

UNSATISFACTORY: Does not meet criteria mentioned in 4.1.4.1. and 4.1.4.2.

4.1.5. **ACCESSIBILITY OF SAFETY INFORMATION BY AIRCREWS:** Rating based on FSO's ability to acquire safety related information, accessibility of information by aircrews, and nature of presentation.

4.1.5.1. FSO has primary use of newer generation computer with Internet access and e-mail supporting software.

4.1.5.2. Safety related literature is available and accessible to aircrews.

4.1.5.3. EXCELLENT: FSO researches timely topics and briefs crews at least monthly. Complies with 4.1.5.1. and 4.1.5.2.

4.1.5.4. SATISFACTORY: Complies with 4.1.5.1. but not 4.1.5.2.

4.1.5.5. MARGINAL: Complies with 4.1.5.2. but not 4.1.5.1.

4.1.5.6. UNSATISFACTORY: Does not comply with 4.1.5.1. or 4.1.5.2.

4.1.6. SAFETY BULLETIN BOARD: Rating based on currency of information and appropriateness of material.

4.1.6.1. Policy letters are current and posted (Wing CC and Sq CC) IAW AFI 91-202, AMC Sup 1, para. 1.8.13.

4.1.6.2. AMC FORM 15, Report All Mishaps And Hazards is posted in prominent areas next to AF FORM 457, USAF Hazard Report IAW AFI 91-202/AMC1 para. 4.5.

4.1.6.3. EXCELLENT: Complies with [4.1.6.1.](#) and [4.1.6.2.](#) and additional safety material is posted.

4.1.6.4. SATISFACTORY: Complies with [4.1.6.1.](#) and [4.1.6.2.](#)

4.1.6.5. MARGINAL: Complies with [4.1.6.2.](#)

4.1.6.6. UNSATISFACTORY: Complies with neither [4.1.6.1.](#) or [4.1.6.2.](#)

4.2. SAFETY PROGRAM COMPLIANCE: Evaluated on compliance of AFI 91-202, AMC Supplement 1, AFI 91-204/AMC1 and GFAFB Safety Policy letters.

4.2.1. SPOT INSPECTION PROGRAM: Rating based on frequency and adequacy of inspections IAW AFI 91-202 , para 7.3.

4.2.1.1. Spot inspections conducted and documented at least 4 times per month.

4.2.1.2. Spot inspections are conducted on all required facilities at least once per quarter.

4.2.1.3. Inspections documented with discrepancies and follow up/tracking of open items until closure.

4.2.1.4. EXCELLENT: Complies [4.2.1.1.](#), [4.2.1.2.](#), and [4.2.1.3.](#)

4.2.1.5. SATISFACTORY: Complies with [4.2.1.1.](#) and [4.2.1.2.](#)

4.2.1.6. UNSATISFACTORY: No documented inspections.

4.2.2. HANDLING, STORAGE AND DESTRUCTION OF PRIVILEGED INFORMATION: Rating based on adequacy of storage facilities and control of privileged information.

4.2.2.1. Adequacy of facilities for privileged interviews.

4.2.2.2. Is privileged information disposed or destroyed properly.

4.2.2.3. Aircrew members are briefed annually on concept and handling of privileged information.

4.2.2.4. SATISFACTORY: Complies with [4.2.1.1.](#), [4.2.1.2.](#) and [4.2.1.3.](#)

4.2.2.5. UNSATISFACTORY: Does not comply with [4.2.1.2.](#) or [4.2.1.3.](#)

4.3. OPERATIONAL RISK MANAGEMENT PROGRAM: Evaluated on Squadron's support and participation of the Wing ORM program, and effectiveness of identifying risks, implementing control measures and tracking until closure.

4.3.1. RISK IDENTIFICATION: Rating based on presence of a vehicle for risk identification in the squadron for all crewmembers to access.

- 4.3.1.1. AF Form 457 is available for hazard ID.
- 4.3.1.2. EXCELLENT: Paragraph 4.3.1.1. is complied with plus active program that solicits input and high Squadron awareness of ORM.
- 4.3.1.3. SATISFACTORY: Complies with 4.3.1.1.
- 4.3.1.4. UNSATISFACTORY: Does not comply with 4.3.1.1.
- 4.3.2. ORM MONITOR OR STEERING COMMITTEE: Rating based on presence of a team or person as a point of contact (POC) to work ORM issues.
 - 4.3.2.1. POC meets with the Group level ORM Program Manager for risk cross-tell, establishment of risk control accountability and generation of follow up actions.
 - 4.3.2.2. Squadron level ORM team has staff support, chaired by ADO or higher.
 - 4.3.2.3. EXCELLENT: Complies with 4.3.2.1. and 4.3.2.2. Squadron ORM POC attends Sq staff meetings regularly and provides inputs on optimizing risk throughout Sq operations.
 - 4.3.2.4. SATISFACTORY: Complies with 4.3.2.1. and 4.3.2.2.
 - 4.3.2.5. UNSATISFACTORY: Does not comply with 4.3.2.1. and 4.3.2.2.
- 4.3.3. FEEDBACK: Rating based on effectiveness of feedback reaching the squadron staff.
 - 4.3.3.1. SATISFACTORY: ORM feedback and current tracking items reach Squadron CC or DO.
 - 4.3.3.2. UNSATISFACTORY: Feedback does not reach Squadron CC or DO.
- 4.3.4. TRACKING: Rating based on completeness of tracking device for Risks until closure.
 - 4.3.4.1. Top 5 risks identified and posted for tracking.
 - 4.3.4.2. Control measures have been assigned to applicable closed items.
 - 4.3.4.3. SATISFACTORY: Complies with 4.3.4.1. and 4.3.4.2.
 - 4.3.4.4. MARGINAL: Complies with 4.3.4.1. but not 4.3.4.2.
 - 4.3.4.5. UNSATISFACTORY: Does not comply with 4.3.4.1. or 4.3.4.2.
- 4.3.5. HAZARD REPORTING: Rating based on compliance with reporting requirements listed in AFI 11-202 Vol. 3 and AFI 91-204.
 - 4.3.5.1. SATISFACTORY: Meets reporting requirements listed in 4.3.5.
 - 4.3.5.2. UNSATISFACTORY: Does not meet requirements listed in 4.3.5.

DAVID S. GRAY, Colonel, USAF
Commander

Attachment 1

GLOSSARY OF REFERENCES AND SUPPORTING INFORMATION

References

AFPD 90-901, *Operational Risk Management*

AFPD 91-2, *Safety Programs*

AFI 91-202, *USAF Mishap Prevention Program*

AFI 91-204, *Safety Investigations and Reports*

AFI 91-301, *Air Force Occupational and Environmental Safety, Fire Protection and Health (AFOSH) Program*

AFI 91-207, *The USAF Traffic Safety Program*

AFI 91-213, *Operational Risk Management (ORM) Program*

Air Force Occupational Safety and Health Standards (91, 48, and 161 Series)

29 CFR 1910, 1926 and 1960 *OSHA Standards*

Attachment 2**ASSESSMENT APPROACH**

A2.1. All disciplines will be inspected during the designated inspection period.

A2.2. Inspector may provide Sq CC with inbrief, if desired.

A2.3. Inspector will provide Sq CC inspection outbrief.

A2.4. Inspector will provide unit with formal written report within 15 duty days of completion of the assessment/inspection.

A2.5. Unit should resolve discrepancies within 30 days of report receipt or identify shortfalls for submission into wing hazard abatement program.

A2.6. RULES: The following rules are established for the Annual Safety Assessment and Inspection Program:

A2.6.1. No pre-inspections will be conducted.

A2.6.2. Absence of documentation will be construed as Not Accomplished.

A2.6.3. Inspections will not be postponed or delayed due to an absence of Unit Safety Representatives (USRs).

A2.6.4. A rating of UNSATISFACTORY in one program element will result in the unit receiving an overall rating no higher than a SATISFACTORY.